

06-12-00

PATENT APPLICATION  
Attorney's Do. No. 2705-104

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

00/60/90  
10853 U.S. PRO

JC784 U.S. PRO  
09/591891  
06/09/00

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DATE OF DEPOSIT: JUNE 9, 2000

I HEREBY CERTIFY THAT THIS PAPER AND ENCLOSURES AND/OR FEE ARE BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO: BOX PATENT APPLICATION, ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON D.C. 20231.

MELISSA SMITH  
(SENDER'S PRINTED NAME)

*Melissa C. Smith*  
(SIGNATURE)

OCTOBER 1 - DECEMBER 31

Box Patent Application  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Enclosed for filing is a patent application under 37 CFR 1.53(b) of:

Inventor [or Application Identifier]: Michael E. Knappe and Shmuel Shaffer  
For: A VIRTUAL CONFERENCE ROOM FOR VOICE CONFERENCING

[If continuing application] This application is a  continuation,  divisional,  continuation-in-part of prior application Serial No. \_\_\_\_\_, filed \_\_\_\_\_.

Enclosures:

- Specification (pages 1-24); claims (pages 25-37); abstract (page 38)
- 10 sheet(s) of drawings
- Declaration or Combined Declaration and Power of Attorney
  - Newly executed (original or copy)
  - Copy from a prior application (37 CFR 1.63(d))
  - Incorporation by Reference--The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
- Deletion of Inventors (signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b)
- Power of Attorney
- Assignment with cover sheet

- Certified copy of priority document:  
 Information Disclosure Statement with Form PTO 1449  
 Copies of references listed on attached Form PTO-1449  
 Preliminary Amendment  
 Change of Address  
 Return Postcard

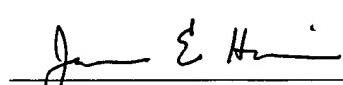
<u>CLAIMS AS FILED</u>				
For	Number Filed	Number Extra	Rate	Basic Fee
Total Claims	39-20	19	x \$ 18 =	342.00
Independent Claims	5-3	2	x \$ 78 =	156.00
Multiple Dependent Claim Fee			x \$260 =	0.00
<b>TOTAL FILING FEE</b>				<b>\$1,188.00</b>

- Cancel in this divisional application original claims \_\_\_\_\_ of the prior application Serial No. \_\_\_\_\_ before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
- A check in the amount of \$1,228.00 to cover  filing fee and  assignment recordal fee (\$40) is enclosed.
- Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.

Customer No. 20575

Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.

  
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